

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: MailMail Stop ISSUE FEE
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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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26161 7590 12/15/2003

FISH & RICHARDSON PC
225 FRANKLIN ST
BOSTON, MA 02110

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Roberta L. Hahn

(Depositor's name)

(Signature)

3-12-2004

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/855,313	05/14/2001	Terry B. Strom	01948-056001	8786

TITLE OF INVENTION: COMPOSITIONS AND METHODS FOR ACHIEVING IMMUNE SUPPRESSION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES NO	XXX \$1330	\$300	XXX \$1630	03/15/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
HAMUD, FOZIA M	1647	424-085200

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Fish & Richardson P.C.

2. _____

3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

BETH ISRAEL DEACONESS MEDICAL CENTER, INC.

Boston, MA USA

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee
- ☒ Advance Order - # of Copies Ten (10)

4b. Payment of Fee(s):

- ☒ A check in the amount of the fee(s) is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 06-1050 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

March 12, 2004

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

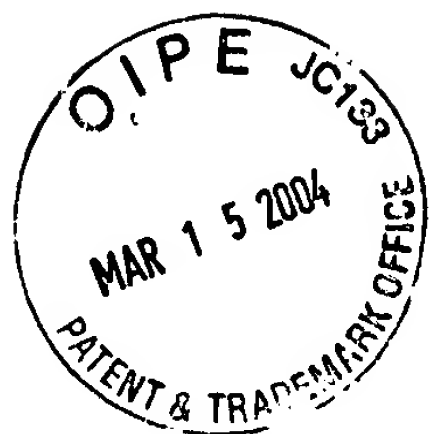
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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03/17/2004 NBERHE1 00000107 09855313

01 FC:1501
02 FC:1504
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TRANSMIT THIS FORM WITH FEE(S)



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Terry B. Strom *et al.*

Serial No. : 09/855,313

Filed : May 14, 2001

Art Unit : 1647

Examiner : Fozia M. Hamud

Confirmation No.: 8786

Notice of Allowance Date: 12/15/2003

Title : COMPOSTION AND METHOD FOR ACHIEVING IMMUNE SUPPRESSION

MAIL STOP ISSUE FEE

Commissioner for Patents

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RESPONSE TO NOTICE OF ALLOWANCE

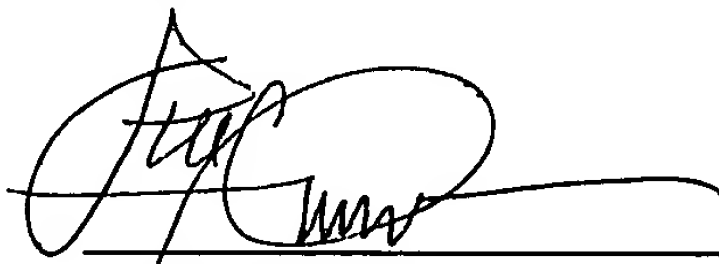
In response to the Notice of Allowance mailed December 15, 2003, enclosed are a completed issue fee transmittal form PTOL-85b, a Transmittal of Formal Drawings (with three sheets of formal drawings), and a check for \$1660 for the required issue fee and publication fee, including patent copies.

The fee paid is appropriate for a large entity. In accordance with 37 C.F.R. §1.27(g)(2), this statement is meant to serve as a specific written assertion that Applicants are no longer entitled to small entity status.

Please apply any additional charges or credits to Deposit Account No. 06-1050, with reference to Attorney Docket No. 13985-056001.

Respectfully submitted,

Date: March 12, 2004



Lee Crews, Ph.D., Reg. No. 43,567

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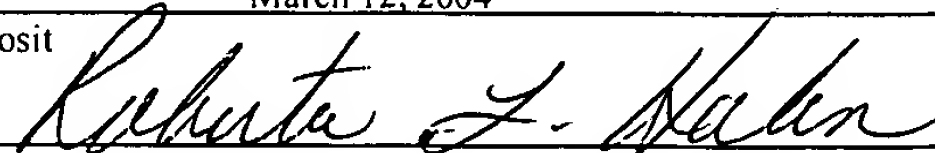
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March 12, 2004

Date of Deposit

Signature



Roberta L. Hahn

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